Case 24-14227 Doc 4 Filed 11/25/24 Entered 11/25/24 15:53:07 Desc Main Document Page 1 of 3

Fill in this information to identify your case:						
Debtor 1	Samson	С	Callis			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Eastern District of Pennsylvania				
Case number (if known)						

Check as directed in lines 17 and 21:
According to the calculations required by this Statement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
☑ 3. The commitment period is 3 years.
4. The commitment period is 5 years.
☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Pa	rt 1: Calculate Your Average Monthly Income							
1.	1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married. Fill out both Columns A and B, lines 2-11.							
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.								
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
2.	 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 				\$0.00			
3.	3. Alimony and maintenance payments. Do not include payments from a spouse.				\$0.00			
4.	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.				\$0.00			
5.	Net income from operating a business, profession, or							
	farm	Debtor 1 \$3,955.16	Debtor 2 \$0.00					
	Gross receipts (before all deductions)							
	Ordinary and necessary operating expenses	\$983.33 -	\$0.00					
	Net monthly income from a business, profession, or farm	\$2,971.83	7	Copy nere –	\$2,971.83			
6.	Net income from rental and other real property	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$0.00	\$0.00					
	Ordinary and necessary operating expenses	\$0.00 -	\$0.00					
	Net monthly income from rental or other real property	\$0.00	70.00	Copy nere –	\$0.00			

Case 24-14227 Doc 4 Filed 11/25/24 Entered 11/25/24 15:53:07 Desc Main Document Page 2 of 3

Debtor 1	Samson	С	Callis		Case number (if known)			
	First Name	Middle Name	Last Name					
				Column Debtor		Column B Debtor 2 or non-filing spouse		
7. Interest, divi	idends, and royalt	ies			\$0.00		_	
8. Unemploym	ent compensation	1			\$0.00		_	
Do not enter	the amount if you	contend that the amo	unt received was a benefit	under				
the Social Se	ecurity Act. Instead	d, list it here:	J					
For you.			<u> </u>	\$0.00				
For your	spouse		······					
under the So include any of States Gove death of a munder chapte exceed the a under any price. 10. Income from not include a victim of a terrorism; of states.	cial Security Act. Accompensation, per rnment in connect ember of the uniform 61 of title 10, the amount of retired provision of title 10 of mall other source any benefits received war crime, a crimer compensation, p	Also, except as stated asion, pay, annuity, or ion with a disability, commed services. If you en include that pay only ay to which you would other than chapter 61 as not listed above. Speed under the Social Speed against humanity, onension, pay, annuity, or	pecify the source and amo Security Act; payments rec r international or domestic r allowance paid by the U	not sed ability, or aid not tired unt. Do eived as	\$0.00		_	
death of a r separate pa Total amoun 11. Calculate y	nember of the unifinge and put the tot	ormed services. If nec al below. ages, if any.	ombat-related injury or disessary, list other sources of the sourc	+	2,971.83	+ +	= \$2,971.83 Total average	
Part 2: Deter	mine How to M	leasure Your Dedu	ctions from Income				monthly income	
12. Copy your	total average mor	nthly income from line	11				\$2,971.83	
13. Calculate tl	ne marital adjustm	nent. Check one:						
☑ You are no	ot married. Fill in 0	below.						
☐ You are m	arried and your sp	ouse is filing with you.	Fill in 0 below.					
☐ You are m	arried and your sp	ouse is not filing with	ou.					
	ndents, such as pa		olumn B, that was NOT req tax liability or the spouse's					
	ecify the basis for eadjustments on a		and the amount of income	devoted to each purp	ose. If neces	sary, list		
If this adju	stment does not a	pply, enter 0 below.						
Total				\$0.	00 Copy	\prime here. $ ightarrow$	\$0.00	
14. Your currer	nt monthly income	e. Subtract the total in	line 13 from line 12.				\$2,971.83	

Case 24-14227 Doc 4 Filed 11/25/24 Entered 11/25/24 15:53:07 Desc Main Document Page 3 of 3

Debtor 1	Samson	С	Callis	Case number (if known)	
	First Name	Middle Name	Last Name		
15. Calculat	e your current mont	hly income for the ye	ear. Follow these step	os:	
15a. Co	pov line 14 here →				\$2,971.83
	tiply line 15a by 12 (x 12
			<i>,</i> , .		
15b. Th	e result is your curre	nt monthly income fo	r the year for this par	rt of the form	\$35,661.96
16 Coloulet	a tha madian family	income that applies	to you Fallow these	otono	
	e the median family I in the state in which		to you. Follow these	Pennsylvania	
	I in the number of pe	,	ald.	1	
TOD. FII	in the number of per	opie in your nouseno	iu.	<u></u>	
16c. Fil	in the median family	income for your stat	e and size of househ	old	\$65,737.00
			nounts, go online usin e available at the ban	ng the link specified in the separate kruptcy clerk's office.	
17. How do	the lines compare?				
17a.	Line 15b is less th	an or equal to line 16	Sc. On the top of pag	e 1 of this form, check box 1, Disposable income is not detern	mined under 11
_	U.S.C. § 1325(b)(3). Go to Part 3. Do l	NOT fill out Calculation	on of Your Disposable Income (Official Form 122C–2).	
17b	1325(b)(3). Go to		alculation of Your Dis	form, check box 2, <i>Disposable income is determined under 1</i> sposable Income (Official Form 122C-2). On line 39 of that form	
Part 3: Cal	•		Jnder 11 U.S.C. §	1325(h)(1)	
rait 5. Cai	Calate roar com		71der 71 0.5.6. 3	1023(8)(4)	
18. Copy yo	ur total average mor	nthly income from lin	ne 11		\$2,971.83
calculatii amount f	ng the commitment p from line 13.	eriod under 11 U.S.C	C. § 1325(b)(4) allows	ouse is not filing with you, and you contend that you to deduct part of your spouse's income, copy the	
19a. If the	marital adjustment of	does not apply, fill in	0 on line 19a		\$0.00
19b. Sub t	ract line 19a from lir	ne 18.			\$2,971.83
20 Calculat	e vour current mont	hly income for the v	ear. Follow these step	ne	
	-				
20a. Copy	line 19b				\$2,971.83
Multip	bly by 12 (the number	r of months in a year).		x 12
					\$35,661.96
20b. The re	esult is your current r	nonthly income for th	ne year for this part of	the form.	
20c. Copy	the median family inc	come for your state a	nd size of household	from line 16c	\$65,737.00
21. How do	the lines compare?				
Line 2	· · · · · · · · · · · · · · · · · · ·			, on the top of page 1 of this form, check box 3,	
Line 2		jual to line 20c. Unles	ss otherwise ordered	by the court, on the top of page 1 of this form,	
Part 4: Sig	n Below				
By signin	g here, under penalty	of perjury I declare t	hat the information o	n this statement and in any attachments is true and correct.	
X <u>/</u>	s/ Samson C Calli	s			
Si	gnature of Debtor 1				
Da	ate 11/25/2024 MM/ DD/ YYYY				
	IVIIVI, DD, IIII				
If you che	cked 17a, do NOT fil	l out or file Form 122	.C-2.		
If you che	cked 17b, fill out For	m 122C-2 and file it	with this form. On line	e 39 of that form, copy your current monthly income from line	14 above.